Fill in this information to identify your case:							
United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS							
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ─ Chapter 11 ─ Chapter 12 ─ Chapter 13						

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself About Debtor 1

Write the name that is on your government-issued picture identification (for example, your driver's license or

1. Your full name

passport).

Bring your picture identification to your meeting with the trustee.

 All other names you have used in the last 8 years

Include your married or maiden names.

 Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

About	Deptor	1:

Sarah

Sarah
First Name

Dawn
Middle Name

Steel
Last Name

Suffix (Sr., Jr., II, III)

First Name	
Middle Name	
Garza	
Last Name	

xxx - xx - <u>1</u>	8	3	3
OR			
9xx - xx -			

About Debtor 2 (Spouse Only in a Joint Case):

First Name			_
Middle Name			_
Last Name			_

Suffix (Sr., Jr., II, III)

First Name

Middle Name

Last Name

9xx - xx - ____ ___ ___

Deb	otor 1	Sarah Dawn Steel			Case	e number (if know	n)
			About Debtor 1	:		About Debtor 2	(Spouse Only in a Joint Case):
and E		usiness names mployer	✓ I have not	used any business names or E	EINs.	☐ I have not us	sed any business names or EINs.
	(EIN)	ication Numbers ou have used in st 8 years	Business name			Business name	
		e trade names and	Business name			Business name	_
	doing b	ousiness as names	Business name			Business name	
					_		
			EIN —			EIN _	
_			EIN			EIN	
5.	Where	you live				If Debtor 2 lives	at a different address:
			574 County R Number Street	oad 4659	_	Number Street	
			Rhome	TX 76078			
			City	State ZIP Code		City	State ZIP Code
			Wise County			County	
			•	address is different from			iling address is different
			the one above,	fill it in here. Note that the any notices to you at this		from yours, fill it	t in here. Note that the court
			Number Street			Number Street	
			P.O. Box			P.O. Box	
			City	State ZIP Code		City	State ZIP Code
6.		ou are choosing	Check one:			Check one:	
	this di bankri	strict to file for uptcy	petition, I h	ast 180 days before filing this have lived in this district longer to other district.	r	petition, I ha	at 180 days before filing this ave lived in this district longer other district.
				ther reason. Explain. S.C. § 1408.)		I have anoth (See 28 U.S	ner reason. Explain. s.C. § 1408.)
Р	art 2:	Tell the Court Ab	oout Your Bank	ruptcy Case			
7.	The ch	napter of the	Check one: (For:	a brief description of each, see	e Notice	e Required by 11 I	U.S.C. § 342(b) for Individuals Filing
	Bankr	uptcy Code you	•	orm 2010)). Also, go to the top			- ','
	under	oosing to file	✓ Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				

Debtor 1 Sarah Dawn Steel				Case number (if known)							
8.	How yo	ou will pay the fee		court pay w	for more details ith cash, cashie	about how you	may pay. Ty oney order. If	pically your	y, if you are pay attorney is sub	ne clerk's office in y ving the fee yoursel mitting your payme nted address.	f, you may
				I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).							
				By law than fee in	w, a judge may, 150% of the offi installments).	but is not require cial poverty line	ed to, waive y that applies t is option, you	your f to you i mus	ee, and may do ir family size an t fill out the App	you are filing for Ch so only if your inco d you are unable to lication to Have the	ome is less pay the
		ou filed for		No							
	bankru last 8 y	iptcy within the /ears?		Yes.							
			Dist	rict _			V	Vhen .	MM / DD / YYYY	Case number	
			Dist	rict _			w	Vhen .		Case number	
			Dist	rict			10				
			DISI	ct			v	viieii .	MM / DD / YYYY	Case number	
10.		y bankruptcy		No							
		pending or being y a spouse who is		Yes.							
		ng this case with r by a business	Deb	otor					Relationsh	nip to you	
	partne	r, or by an	Dist	rict			W	Vhen		Case number,	
	affiliate	9?							MM / DD / YYYY		
			Deb	otor					Relationsh	nip to you	
										Case number,	
									MM / DD / YYYY		
11.	Do you resider	ı rent your nce?	☑	No. Yes.		lord obtained an	eviction judg	jment	against you?		
										Against You (Form	101A)

Debtor 1	Sarah Dawn Steel				Case num	nber (if known) _				
Part 3:	Report About An	ıy Bu	ısine	sses You Own as a	a Sole Proprietor					
-	u a sole proprietor full- or part-time ess?	☑		Go to Part 4. Name and location of b	usiness					
busine individ separa	proprietorship is a ss you operate as an ual, and is not a te legal entity such as pration, partnership, or			Name of business, if any Number Street						
sole pr separa	nave more than one oprietorship, use a te sheet and attach it petition.			Health Care Busin Single Asset Rea Stockbroker (as d	box to describe your business (as defined in 11 U.S Estate (as defined in 11 Uefined in 11 U.S.C. § 101(er (as defined in 11 U.S.C.	S.C. § 101(27A)) U.S.C. § 101(51E (53A))	ZIP Co	ode		
3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		can mos	set ap st recei	propriate deadlines. If you balance sheet, statem	the court must know whethe you indicate that you are a lent of operations, cash-floot to exist, follow the procedu	small business on statement, and	debtor, you d federal ir	nust attach your ncome tax return		
debtor	7	$\overline{\mathbf{V}}$	No.	I am not filing under Chapter 11.						
	lefinition of small ss debtor, see		No.	I am filing under Chapt the Bankruptcy Code.	er 11, but I am NOT a sma	all business debt	or accordir	ng to the definition in		
11 U.S	.C. § 101(51D).		Yes.	I am filing under Chapt Bankruptcy Code.	er 11 and I am a small bus	siness debtor ac	cording to	the definition in the		
Part 4:	Report If You Ov	vn or	Hav	e Any Hazardous F	Property or Any Prop	perty That Ne	eds Imn	nediate Attention		
proper allege immin	4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?						
hazaro safety any pr immed			If immediate attention	is needed, why is it needed	d?					
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number						per Street				
					City		State	ZIP Code		

Debtor 1 Sarah Dawn Steel

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. **About Debtor 1:**

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not require	d to receive a briefing about
credit counselin	ng because of:
☐ Incapacity.	I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

reasonably tried to do so.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	Saran Dawn Steel				Case number (if I	knowi	n)	
Pa	Part 6: Answer These Questions for Reporting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.					
		16c.	c. State the type of debts you owe that are not consumer or business debts.					
17.	Are you filing under Chapter 7?		No. I am not filing under	Chap	ter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?			•	•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do you estimate your assets to be worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much do you estimate your liabilities to be?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Debtor 1	Sarah Dawn Steel		Case number (if known)					
Part 7:	Sign Below							
For you		I have examined this petition, and I declare and correct.	e under penalty of perjury that the information provided is true					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		oter of title 11, United States Code, specified in this petition.						
		•	ncealing property, or obtaining money or property by fraud in ult in fines up to \$250,000, or imprisonment for up to 20 years, d 3571.					
		X /s/ Sarah Dawn Steel	X					
		Sarah Dawn Steel, Debtor 1	Signature of Debtor 2					
		Executed on <u>08/23/2018</u> MM / DD / YYYY	Executed on					

Debtor 1	Sarah Dawn Steel	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alex Bouthilet	Date	08/23/2018	
Signature of Attorney for Debtor		MM / DD / YYYY	
Alex Bouthilet			
Printed name			
The Wright Firm, L.L.P.			
Firm Name			
8150 N. Central Expressway			
Number Street			
Suite 775			
Dallas	тх	75206	
City	State	ZIP Code	
Contact phone (469) 635-6900	Email address		
Contact phone (469) 635-6900 24080800	Email address		

Fi	II in this info	ormation to i	dentify your c	ase and this filing:			
De	ebtor 1	Sarah	Dawn	Steel			
		First Name	Middle Name	Last Name			
	ebtor 2	First Name	Middle Name	Loot Name			
(5	pouse, if filing)	First Name	Middle Name	Last Name			
Ur	nited States Ban	kruptcy Court fo	r the: EASTERN	DISTRICT OF TEXAS	<u> </u>		
	ase number				_	☐ Check	if this is an
(if	known)					_	ed filing
Off	ficial Form	106A/B					
Sc	hedule A/I	B: Propert	у				12/15
the filin she	asset in the car g together, bot et to this form.	tegory where you hare equally re On the top of a	ou think it fits be esponsible for su any additional pa	st. Be as complete and pplying correct informa ges, write your name an	accurate as tion. If more nd case num	set fits in more than one cat possible. If two married pe space is needed, attach a see the (if known). Answer eve	eople are separate ry question.
	art it Des	cribe Lacir i	vesidence, bu	namy, Lana, or Oti	iei iteai L	state Tod Own of Have	an interest in
1.	Do you own o	r have any lega	l or equitable int	erest in any residence,	building, lan	d, or similar property?	
	No. Go to		. 0				
	Yes. vvne	ere is the proper	ty?				
2.		-	-	or all of your entries from . Write that number he			\$0.00
	———	ges you nave at	tached for Fart 1	. Write that number he			
Pa	art 2: Des	cribe Your V	ehicles/				
		. •	•		•	e registered or not? Include cutory Contracts and Unexpire	•
3.	Cars, vans, tru	ucks, tractors, s	sport utility vehic	les, motorcycles			
	□ No						
	☑ Yes						
3.1.				has an interest in the p	roperty?	Do not deduct secured clai	•
Mak		Chevrolet		k one. Debtor 1 only		amount of any secured clair Creditors Who Have Claim	
Mod		Sonic	لننا	Debtor 2 only		Current value of the	Current value of the
Yea		2014	_	Debtor 1 and Debtor 2 on	ly	entire property?	portion you own?
	roximate mileag	e: 91,000	—	At least one of the debtor	s and anothe	\$3,500.00	\$3,500.00
	er information: 4 Chevrolet S	Sonic (approx.	91 000 🖂 (Check if this is commun	ity property		
mile		omo (approx.	_	see instructions)	, p. opo,		
4.	Examples: Box			other recreational vehiclercraft, fishing vessels, sr		hicles, and accessories motorcycle accessories	
	✓ No ☐ Yes						
5.		-	-	or all of your entries from			\$3,500.00

Deb	tor 1	Sarah Dawn Steel Ca	ase number (if known)
		1	
P	art 3:	Describe Your Personal and Household Items	
Do	you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware	
	□ No ✓ Yes	Describe Bedroom furniture \$30.00 Household tools \$25.00	\$55.00
7.	Electron Example	 nics es: Televisions and radios; audio, video, stereo, and digital equipment; compumusic collections; electronic devices including cell phones, cameras, med 	•
	☐ No ✓ Yes	Describe Television \$50.00 Computer \$50.00	\$100.00
8.	Example	ibles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, stamp, coin, or baseball card collections; other collections, memorabilia, co	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Describe	
9.		nent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool canoes and kayaks; carpentry tools; musical instruments	tables, golf clubs, skis;
	✓ No ☐ Yes	. Describe	
10.		es: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	. Describe	
11.		es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes	. Describe Clothing	\$20.00
12.	Jewelry Example	r es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirl gold, silver	oom jewelry, watches, gems,
	✓ No ☐ Yes	. Describe	
13.		m animals es: Dogs, cats, birds, horses	
	☐ No ✓ Yes	. Describe 2 Dogs	\$0.00
14.	Any oth	ner personal and household items you did not already list, including any h list	ealth aids you
		. Give specific rmation	

Debtor 1		Sarah Dawn Steel	ase number (if known)		
15.		_	entries from Part 3, including any entries for pober here	_	\$175.00
P	art 4:	Describe Your Fina	ncial Assets		
Do	you own	or have any legal or equit	able interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	les: Money you have in your petition	wallet, in your home, in a safe deposit box, and o	n hand when you file your	
	✓ No ☐ Yes	S		Cash:	
17.	•	-	ther financial accounts; certificates of deposit; sha other similar institutions. If you have multiple acco		
	□ No ✓ Yes	S	Institution name:		
	17	.1. Checking account:	Checking account First Financial Bank end in 7233		\$60.00
	17	.2. Savings account:	Savings account First Financial		\$50.00
18.	Example No.	mutual funds, or publicly les: Bond funds, investment	accounts with brokerage firms, money market acc	counts	
19.	Mon-pu		erests in incorporated and unincorporated bus	inesses, including	
	✓ No ☐ Yes	s. Give specific ormation about m Name o	•	% of ownership:	
20.	Negotia	able instruments include pers	s and other negotiable and non-negotiable instr sonal checks, cashiers' checks, promissory notes, se you cannot transfer to someone by signing or d	and money orders.	
	info	s. Give specific ormation about m Issuer I	name:		
21.		nent or pension accounts les: Interests in IRA, ERISA, profit-sharing plans	, Keogh, 401(k), 403(b), thrift savings accounts, or	other pension or	
	_	s. List each count separately. Type of a	account: Institution name:		

Deb	tor 1	Sarah Dawn Stee	<u> </u>	Case number (if known)	
22.	Your sha		ayments osits you have made so that you may contir landlords, prepaid rent, public utilities (elect			
	☑ No					
	_		Institution name or individ			
23.		es (A contract for a	specific periodic payment of money to you, e	either for life or for a number of yea	ırs)	
	✓ No ☐ Yes	I	ssuer name and description:			
24.	Interest		A, in an account in a qualified ABLE prog	gram, or under a qualified state t	uition pro	ogram.
	✓ No ☐ Yes		nstitution name and description. Separately	file the records of any interests.	11 U.S.C.	. § 521(c)
25.	Trusts,		nterests in property (other than anything			0 * (*)
	. No No Yes	. Give specific rmation about them				
26.			narks, trade secrets, and other intellectua ames, websites, proceeds from royalties an			
		. Give specific rmation about them				
27.			ther general intangibles exclusive licenses, cooperative association	holdings, liquor licenses, profession	onal licen	ses
		. Give specific rmation about them				
Mor	ney or pr	operty owed to you	•			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to you				
	□ No					
	✓ Yes		nation Federal: Estimated 2018 Tax r	efund. Amt: \$4,500.00	Federal	1: \$4,500.00
		ut them, including wh already filed the retu			State:	\$0.00
	and	the tax years			Local:	\$0.00
29.	Family :		sum alimony, spousal support, child suppor	t, maintenance, divorce settlemen	t, property	y settlement
	✓ No	Oirea ann aitir intann		A I:		
	Yes	. Give specific inforr	ation	Alimony:		
				Maintenar	ice:	
				Support:	o#10 == = = 1	
				Divorce so		
				Property s	.ememen	L.

Deb	tor 1 Sarah Dawn Steel	Case number (if known)	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability compensation, Social Security benefits; unpaid loans		
	✓ No✓ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings according to the control of t	count (HSA); credit, homeowner's, or renter's insu	urance
	 No Yes. Name the insurance company of each policy and list its value Company name: 	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has lif you are the beneficiary of a living trust, expect proceeds from a entitled to receive property because someone has died		
	✓ No✓ Yes. Give specific information		
33.	Claims against third parties, whether or not you have filed a Examples: Accidents, employment disputes, insurance claims, or		
	✓ No✓ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including rights to set off claims	cluding counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim		
35.	Any financial assets you did not already list		
	☑ No		
	Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including attached for Part 4. Write that number here		\$4,610.00
Pa	art 5: Describe Any Business-Related Property Yo	ou Own or Have an Interest In. List an	y real estate in Part 1
37.	Do you own or have any legal or equitable interest in any bus	siness-related property?	
	✓ No. Go to Part 6.✓ Yes. Go to line 38.		
			Current value of the
			portion you own? Do not deduct secured
20	A		claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe		
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, print desks, chairs, electronic devices	ters, copiers, fax machines, rugs, telephones,	
	✓ No ✓ Yes. Describe		
	•—•		

Deb	tor 1 Sarah Dawn Steel	Case number (if known)
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of	your trade
	✓ No ☐ Yes. Describe	
41.	Inventory	
	✓ No ☐ Yes. Describe	
42.	Interests in partnerships or joint ventures	
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:
43.	Customer lists, mailing lists, or other compilations	
	No Yes. Do your lists include personally identifiable information (as define No Yes. Describe	ed in 11 U.S.C. § 101(41A))?
44.	Any business-related property you did not already list	
	✓ No✓ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries attached for Part 5. Write that number here	
Pa	Describe Any Farm- and Commercial Fishing-Related P If you own or have an interest in farmland, list it in Part 1.	roperty You Own or Have an Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commerce	cial fishing-related property?
	✓ No. Go to Part 7. ☐ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish	·
	✓ No Yes	
48.	Cropseither growing or harvested	
	✓ No Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of	trade
	✓ No Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	

Deb	tor 1	Sarah Dawn Steel	Case number	er (if known)			
51.	Any far	m- and commercial fishing-related property you did not already list					
		s. Give specific					
52.		e dollar value of all of your entries from Part 6, including any entries f d for Part 6. Write that number here			→		\$0.00
P	art 7:	Describe All Property You Own or Have an Interest in Th	at You Did	Not List A	bove		
53.	•	have other property of any kind you did not already list? es: Season tickets, country club membership					
	✓ No ☐ Yes	s. Give specific information.					
54.	Add the	e dollar value of all of your entries from Part 7. Write that number her	e		→		\$0.00
Pa	art 8:	List the Totals of Each Part of this Form					
55.	Part 1:	Total real estate, line 2			→		\$0.00
56.	Part 2:	Total vehicles, line 5 \$3	3,500.00				
57.	Part 3:	Total personal and household items, line 15	\$175.00				
58.	Part 4:	Total financial assets, line 36 \$4	l,610.00_				
59.	Part 5:	Total business-related property, line 45	\$0.00				
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00				
61.	Part 7:	Total other property not listed, line 54	\$0.00				
62.	Total po	ersonal property. Add lines 56 through 61		opy personal operty total	→	+	\$8,285.00
63.	Total of	f all property on Schedule A/B. Add line 55 + line 62					\$8.285.00

	Sarah	Dawn	Steel			
Dahtar 0	First Name	Middle Nam	e Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Nam	e Last Name			
United States Ba	inkruptcy Court for	r the: EASTER	N DISTRICT OF TE	XAS		☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C	: The Prope	erty You C	laim as Exemp	ot		04/
		-	_			
Jsing the property pace is needed, f	you listed on Sch	nedule A/B: Prop to this page as n	perty (Official Form 10	6A/B)	as your source, list th	esponsible for supplying correct informatic e property that you claim as exempt. If mossary. On the top of any additional pages
s to state a speci exempted up to the eceive certain be exemption of 100	ific dollar amoun he amount of any enefits, and tax-e % of fair market	t as exempt. A applicable sta xempt retireme value under a la	Iternatively, you may tutory limit. Some ex ent fundsmay be unl	clain xempt limite emptic	n the full fair market iionssuch as those d in dollar amount. h on to a particular doll	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	perty You Cla	aim as Exempt			
. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
☐ You are	claiming state and	d federal nonbar	nkruptcy exemptions.	11 U.	S.C. § 522(b)(3)	
✓ You are	claiming federal e	exemptions. 11	U.S.C. § 522(b)(2)			
_					- ,,,,	below.
— P. For any prop Brief description		Schedule A/B th and line on	U.S.C. § 522(b)(2)	mpt, fi Amo	- ,,,,	below. Specific laws that allow exemption
— 2. For any prop Brief description	perty you list on S	Schedule A/B th and line on	U.S.C. § 522(b)(2) nat you claim as exer Current value of the portion you	mpt, fi Amo exer	III in the information ount of the mption you claim	
2. For any prop Brief description Schedule A/B tha Brief description:	of the property a t lists this proper Sonic (approx.	Schedule A/B th and line on rty	U.S.C. § 522(b)(2) nat you claim as exer Current value of the portion you own Copy the value from	mpt, fi Amo exer	ill in the information bunt of the mption you claim ck only one box for	
2. For any prop Brief description Schedule A/B that Brief description: 2014 Chevrolet niles)	of the property a t lists this proper Sonic (approx.	Schedule A/B th and line on rty	U.S.C. § 522(b)(2) nat you claim as exer Current value of the portion you own Copy the value from Schedule A/B \$3,500.00	Amore exer	ill in the information bunt of the mption you claim ck only one box for n exemption \$3,500.00 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption 11 U.S.C. § 522(d)(2)
Brief description Brief description Brief description: Brief description: Brief description: Brief Chevrolet Brief of Chevrolet Brief of Schedul	serty you list on Sof the property at lists this property as to lists this property. Sonic (approx. le A/B:	Schedule A/B th and line on rty	U.S.C. § 522(b)(2) nat you claim as exer Current value of the portion you own Copy the value from Schedule A/B	mpt, fi Amo exer Che each	bunt of the mption you claim ck only one box for a exemption \$3,500.00 100% of fair market value, up to any applicable statutory	Specific laws that allow exemption

Yes

Debtor 1 Sarah Dawn Steel Case number (if known)

Part 2: Additional Page				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description: Television \$50.00 Computer \$50.00 Line from Schedule A/B:7	<u>\$100.00</u>	\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)	
Brief description: Clothing Line from Schedule A/B:11	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)	
Brief description: 2 Dogs Line from Schedule A/B:13	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description: Checking account First Financial Bank end in 7233 Line from Schedule A/B:	\$60.00	\$60.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description: Savings account First Financial Line from Schedule A/B:	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description: Estimated 2018 Tax refund Line from Schedule A/B:28	\$4,500.00	\$4,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	

Fill in this inf	ormation to id	entify your case:					
Debtor 1	Sarah	Dawn	Steel				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court for	the: EASTERN DIS	TRICT OF TEXAS				
Case number							
(if known)					Check if this is amended filing		
Official Form	106D						
Schedule D	: Creditors \	Who Have Cla	ims Secured by	Property		12/15	
correct informatic On the top of any 1. Do any credit No. Che	on. If more space additional pages, tors have claims	is needed, copy the write your name an secured by your proposition to the community this form to the community that is needed, copy the secured by your proposition.	ed people are filing togother Additional Page, fill it of discussion of the case number (if known perty? Sourt with your other school of the case of	out, number the entri	es, and attach it to thi	s form.	
Part 1: Lis	t All Secured	Claims					
claim, list the creditor has a	creditor separately particular claim, listible, list the claims		ore than one n Part 2. As according to the property that	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
		secures the	claim:				
Creditor's name							
Number Street							
Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a communi	Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Statutory lien (such as tax lien, mechanic's lien)						
Date debt was inc	curred	Last 4 digits	of account number				
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from							

Official Form 106D

all pages. Write that number here:

Fill in this inf	ormation to ide	entify your ca	ase:			
Debtor 1	Sarah First Name	Dawn Middle Name	Steel Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the	ne: EASTERN	DISTRICT OF TEXAS			
Case number (if known)					Check if this is a amended filing	an
Official Form				_		
Schedule E	/F: Creditors	Who Have	Unsecured Claims			12/15
Do not include an If more space is r to this page. On the	y creditors with pa needed, copy the Pa	artially secured art you need, fil tional pages, w	and on Schedule G: Executory Conclaims that are listed in Schedule I it out, number the entries in the rite your name and case number ecured Claims	le D: Creditors Who He boxes on the left. A	old Claims Secur	ed by Property.
1. Do any credi	tors have priority ι	ınsecured clain	ns against you?			
☐ No. Go ✓ Yes.	to Part 2.					
claim. For ea show both pri more space is	nch claim listed, iden ority and nonpriority	tify what type of amounts. As m unsecured clain	creditor has more than one priority claim it is. If a claim has both priouch as possible, list the claims in ans, fill out the Continuation Page of	rity and nonpriority am alphabetical order acco	ounts, list that clain rding to the creditor	m here and or's name. If
(For an expla	nation of each type	of claim, see the	instructions for this form in the ins	struction booklet. Total claim	Priority	Nonpriority
2.1				\$4 F00 00	amount	amount
Internal Revenu	ie Service		Lock & digital of account number	\$1,500.00	\$1,500.00	\$0.00
Priority Creditor's Name P.O. Box 21126	ne		Last 4 digits of account number When was the debt incurred?			
Number Street					_	
			As of the date you file, the clain Contingent	is: Check all that app	ory.	
Philadelphia City		9114 P Code	Unliquidated Disputed			
ш	Debtor 2 only the debtors and an claim is for a comn	other	Type of PRIORITY unsecured cl ☐ Domestic support obligations ☐ Taxes and certain other debts ☐ Claims for death or personal intoxicated ☐ Other. Specify	s you owe the governm	ent	

Debtor 1 Sarah Dawn Ste	el	Case number (if known)	
Part 2: List All of You	ur NONPRIORIT	Y Unsecured Claims	
3. Do any creditors have nor	npriority unsecured	claims against you?	
No. You have nothing✓ Yes	to report in this part	. Submit this form to the court with your other schedules.	
If a creditor has more than of type of claim it is. Do not list	one nonpriority unse st claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	
			Total claim
4.1			\$3,294.00
Barclays Bank Delaware Nonpriority Creditor's Name Attn: Correspondence Number Street PO Box 8801		Last 4 digits of account number 3 1 7 0 When was the debt incurred? 09/2014 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated	
Wilmington DE	19899	Disputed	
City State	ck one.	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card - Carnival Funpoints	
4.2			\$1,920.87
Baylor Regional Medical Conversion of the Nonpriority Creditor's Name	enter Grapevine	_ Last 4 digits of account number	
P.O. Box 847229		When was the debt incurred?	
Number Street		 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated 	
Dallas TX	75284	Disputed	
City State	e ZIP Code ck one. nd another	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$656.88
Baylor Regional Medical Center Grapevine	Last 4 digits of account number	· ·
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 847229 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Dallas TX 75284	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
▼ No		
Yes		
4.4		¢E92.00
	Last 4 digits of account number	\$582.00
Ronpriority Creditor's Name	When was the debt incurred?	
P.O. Box 847229		
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Dallas TX 75284 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Medical Medical	
Is the claim subject to offset? ✓ No		
☑ No ☐ Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.5		\$328.44
Baylor Regional Medical Center Grapevine	Last 4 digits of account number	· ·
Nonpriority Creditor's Name P.O. Box 847229	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Dallas TX 75284		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations crising out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Medical	
No No		
Yes		
4.6		\$1,920.87
Baylor Scott & White Nonpriority Creditor's Name	_ Last 4 digits of account number	
PO Box 847229	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
D-II TV 75004 7000	Disputed	
Dallas TX 75284-7229 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
✓ No		
Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.7		\$3,394.00
BB&T	Last 4 digits of account number 6 7 0 3	
Nonpriority Creditor's Name	When was the debt incurred? 03/2013	
Attn: Bankruptcy Department Number Street	As of the date you file, the claim is: Check all that apply.	
6010 Golding Center Dr.	_ ☐ Contingent	
	Unliquidated	
Winston Salem NC 27013	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Recreational	
Is the claim subject to offset?	Necreational	
✓ No		
Yes		
4.8		*
		\$27.10
BioReference Laboratories Nonpriority Creditor's Name	Last 4 digits of account number	
481 Edward H. Ross Drive	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Elmwood Park NJ 07407		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
No No		
Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Uns	ecured Claims Continuation Page	
After listing any entries on this page, number previous page.	r them sequentially from the	Total claim
4.9		\$423.60
BYL Collection Service, LLC	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 569 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Malver PA 19355-05	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community de	Other. Specify Collecting for - Cardionet, Inc	
Is the claim subject to offset?	concount our money, mo	
☑ No		
Yes		
4.10		* 400.00
	Lead Address of account numbers A	\$130.00
Capital One Nonpriority Creditor's Name	Last 4 digits of account number 1 0 5 6	
Attn: Bankruptcy	When was the debt incurred? 04/2018	
Number Street PO Box 30285	As of the date you file, the claim is: Check all that apply.	
FO BOX 30283	☐ Contingent ☐ Unliquidated	
	Unliquidated Disputed	
Salt Lake City UT 84130		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community de		
Is the claim subject to offset?		
☑ No		
Yes		

Debtor 1 Sarah Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.11		\$6,677.00
Cavalry Portfolio Services	Last 4 digits of account number 0 2 9 9	
Nonpriority Creditor's Name ATTN: Bankruptcy Department	When was the debt incurred? 06/2017	
Number Street 500 Summit Lake Ste 400	As of the date you file, the claim is: Check all that apply.	
500 Summit Lake Ste 400	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Uniquidated ☐ Uniquida	
V-IIII- NV 40505	Disputed	
Valhalla NY 10595 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes 4.12 Cavalry Portfolio Services	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - CitiBank Last 4 digits of account number 8 7 0 8	\$410.00
Nonpriority Creditor's Name	When was the debt incurred? 02/2017	
ATTN: Bankruptcy Department Number Street	As of the date you file, the claim is: Check all that apply.	
500 Summit Lake Ste 400	Contingent	
	☐ Unliquidated ☐ Disputed	
Valhalla NY 10595 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Synchrony Bank	
Yes		

Debtor 1 Sarah Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.13		\$2,072.00
Citibank / Sears	Last 4 digits of account number 5 1 5 0	
Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz	When was the debt incurred? 11/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 790040	_ Contingent	
	Unliquidated	
Saint Louis MO 63179	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No No		
Yes		
4.14		\$6,202.00
LI Citibank/Best Buy	Last 4 digits of account number 6 1 7 9	Ψ0,202.00
Nonpriority Creditor's Name	When was the debt incurred? 06/2011	
Centralized Bankruptcy/CitiCorp Credit S Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 790040	_ ☐ Contingent	
	Unliquidated	
St Louis MO 63179	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Crount duru	
✓ No		
Yes		

Debtor 1 Sarah Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$272.25
Cook Children's Northeast Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 99406	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Fort Worth TX 76199-0406 City State ZIP Code	Type of NONERIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	 □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical 	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
<u>M</u> No		
Yes		
4.16		\$3,132.00
Discover Financial	Last 4 digits of account number 4 1 9 8	
Nonpriority Creditor's Name PO Box 3025	When was the debt incurred? 01/2008	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	□ Unliquidated □ □ Disputed	
New Albany OH 43054		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Credit Card	
No		
Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.17		\$321.00
Dish Network	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 105169 Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Unliquidated	
Atlanta GA 30348-5169	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Utilities	
Is the claim subject to offset?		
▼ No		
Yes		
4.18		\$834.00
ERC/Enhanced Recovery Corp	Last 4 digits of account number 9 8 7 6	
Nonpriority Creditor's Name	When was the debt incurred? 02/2018	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
8014 Bayberry Road	_	
	Unliquidated	
Jacksonville FL 32256	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Collecting for - Sprint	
Is the claim subject to offset?	···· J ······	
✓ No		
Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.19		\$3,004.00
Freedom Road Financial	_ Last 4 digits of account number _1_ 9_ 2_ 7_	
Nonpriority Creditor's Name ATTN: Bankruptcy Dept.	When was the debt incurred? 10/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
10509 Professional Circle, Suite 202	□ Contingent □ Unliquidated	
	□ Disputed	
Reno NV 89521 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?		
No No		
Yes		
4.20		\$2,580.00
Midland Funding	Last 4 digits of account number 3 7 8 6	
Nonpriority Creditor's Name 2365 Northside Dr Ste 300	When was the debt incurred? 05/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
San Diego CA 92108 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$1,465.00
Midland Funding	Last 4 digits of account number 9 5 9 7	
Nonpriority Creditor's Name 2365 Northside Dr Ste 300	When was the debt incurred? 02/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
San Diego CA 92108	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Collecting for - Synchrony Bank	
Is the claim subject to offset?		
☑ No □ Yes		
4.22		\$14.81
Pathologists Bio-Med	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 610483	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Dallas TX 75261-0483	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	IVICUICAI	
No		
☐ Yes		
_		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.23		\$13.15
Pathologists Bio-Med	Last 4 digits of account number	· ·
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 610483 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Dallas TX 75261-0483	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	in out out	
✓ No		
Yes		
4.24		^- • ·
	Last A Marks of account country	\$5.04
Pathologists Bio-Med Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 610483	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Dallas TX 75261-0483 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consention agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
No No		
Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.25		\$255.00
Pediatrix Medical Group	Last 4 digits of account number	· ·
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 88087 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Chicago IL 60680-1087	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.26		\$511.91
Rajeshb Vrushab, M.D.	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
1615 Precinct Line Road, Ste 103 Number Street	As of the date you file, the claim is: Check all that apply.	
Trumber Street	Contingent	
	Unliquidated	
Hurst TX 76054-3345	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	···	
✓ No		
Yes		

Debtor 1	Sarah Dawr	Steel		Case number (if known)	
Part 2:	Your NO	NPRIC	RITY Unsecu	red Claims Continuation Page	
After listin		n this p	page, number the	m sequentially from the	Total claim
4.27					\$0.00
	cher Clinical P	artner	S	Last 4 digits of account number	
PO Box 8	Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.		
				_ Contingent	
				Unliquidated	
San Anto	nio	TX	78293-0830	Disputed	
City	-	State	ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check	cone.	☐ Student loans	
لت	r 1 only			Obligations arising out of a separation agreement or divorce	
ш	r 2 only r 1 and Debtor 2	only		that you did not report as priority claims	
	st one of the debi	•	d another	Debts to pension or profit-sharing plans, and other similar debts	
				Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?			Jillinamity acbt	Collecting for - Wise Health	
	in subject to on	Set?			
✓ No ☐ Yes					
4.28					\$143.70
Sheffield Financial				Last 4 digits of account number	
Nonpriority Creditor's Name				When was the debt incurred?	
P.O. Box Number	580229 Street			As of the date you file, the claim is: Check all that apply.	
	3 331			_ ☐ Contingent	
				Unliquidated	
Charlette		NC	20250 0220	Disputed	
Charlotte	•	NC State	28258-0229 ZIP Code	Type of NONDRIORITY uncoured claims	
•	red the debt?	Check		Type of NONPRIORITY unsecured claim:	
✓ Debtor	r 1 only			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor	r 2 only			that you did not report as priority claims	
	r 1 and Debtor 2			Debts to pension or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	tors and	another	Other. Specify	
☐ Check	if this claim is	for a co	ommunity debt	Non-Purchase Money	
Is the clair	m subject to off	set?			
☑ No					
☐ Yes					

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.29		\$0.00
South Shore Bank Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 151	Last 4 digits of account number 8 8 6 2 When was the debt incurred? 01/31/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Weymouth MA 02188		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Mobile Home	
4.30		\$200.00
Syncb/toysrus	Last 4 digits of account number 4 1 0 4	
Nonpriority Creditor's Name	When was the debt incurred? 05/2016	
Attn: Bankrupty Number Street PO Box 103104	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Roswell GA 30076	Disputed	
City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account	

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.31		\$1,109.00
Synchrony Bank/Lowes Nonpriority Creditor's Name PO Box 965064 Number Street	Last 4 digits of account number 6 8 9 3 When was the debt incurred? 03/2014 As of the date you file, the claim is: Check all that apply. Contingent	
Orlando FL 32896	Unliquidated Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	
✓ No ☐ Yes		\$1,913.00
Us Bank	Last 4 digits of account number 5 6 2 8	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 10/2014	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Fargo ND 58125 City State ZIP Code		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
Yes		

Debtor 1	Sarah Dawn Steel	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing	g any entries on this page, number the age.	m sequentially from the	Total claim
4.33			\$2,339.00
Attn: Ban	reditor's Name kruptcy Street	Last 4 digits of account number 5 6 2 8 When was the debt incurred? 10/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Cincinnati OH 45201 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.34			\$5,592.00
	reditor's Name kruptcy Dept Street	Last 4 digits of account number 4 4 7 6 When was the debt incurred? 02/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Greenville City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

Debtor 1 Sarah Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.35		\$5,247.00
Wells Fargo Bank Card	Last 4 digits of account number 4 4 7 6	
Nonpriority Creditor's Name MAC F82535-02F	When was the debt incurred? 02/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 10438	Contingent	
	☐ Unliquidated ☐ Disputed	
Des Moines IA 50306 City State ZIP Code	·	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Gard	
✓ No		
Yes		
4.36		\$5,047.00
Wells Fargo Bank la N	Last 4 digits of account number 9 0 6 2	
Nonpriority Creditor's Name MAC F82535-02F	When was the debt incurred? 02/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 10438	Contingent	
	☐ Unliquidated ☐ Disputed	
Des Moines IA 50306		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
-	Other. Specify	
Check if this claim is for a community debt	Check Credit or Line of Credit	
Is the claim subject to offset? ✓ No		
☐ Yes		

Saran Dawn Steel	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.37		\$5,635.00
Wells Fargo Bank la N	Last 4 digits of account number 9 0 6 2	
Nonpriority Creditor's Name Attn: Bankruptcy Dept	When was the debt incurred? 02/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6429	_ Contingent	
	Unliquidated	
Greenville SC 29606	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Check Credit or Line of Credit	
Is the claim subject to offset?		
✓ No		
☐ Yes		
4.38		\$0.00
Wise Health System	Last 4 digits of account number	
Nonpriority Creditor's Name 2000 S. FM51	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Decatur TX 76234	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No		
Yes		

Debtor 1	Sarah Dawn Steel	Case number (if known)	
Part 3:	List Others to Be Notified About a Debt That You Alrea	dy Listed	

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Capital One			On which entry in Pa	rt 1 or Pa	ırt 2	did	yo	u li	ist	the	e o	rigi	ina	al (cre	edi	itor	?				
Name P.O. Box 650007			Line of (Che	ck one):	П	Part	t 1·	Cr	edi	tor	s w	/ith	ı P	rio	ritv	v U	Inse	ecui	red (Clain	ns	
Number Street			Credit Card	on ono,.	片										-				ecur			ms
			_		Ч	ı an	۰ ۷.	Oi	cu	tor	3 W	VICII	1 4	011	РП	1011	ty C	اداار	Jour	cu c	Jian	113
			Last 4 digits of accor	unt numb	er	_1		3		1_	3	3										
Dallas City	TX State	75265-0007 ZIP Code	_																			
City	State	Zii Code																				
Central Loan Admin	& R		On which entry in Pa	rt 1 or Pa	ırt 2	did	yo	u li	st	the	e 0	rigi	ina	al (cre	edi	itor	?				
Name 425 Phillips Blvd			Line of (Che	ck one):	П	Part	t 1:	Cr	edi	tor	s w	/ith	P	rio	ritv	v U	Jnse	ecur	red (Clain	ns	
Number Street			Mobile Home	,											·				ecur			ns
			Last 4 digits of accor	unt numb	er	8		8		<u>6</u>	_2	<u> </u>										
Ewing City	NJ State	08618 ZIP Code	_																			
City	State	ZIF Code																				
Diversified HealthCa	re Service	es, Inc.	On which entry in Pa	rt 1 or Pa	ırt 2	did	yo	u li	ist	the	e o	rigi	ina	al (cre	edi	itor	?				
Name P.O. Box 847229			Line of (Che	ck one):	П	Part	t 1:	Cr	edi	tor	s w	/ith	P	rio	rity	y U	Jnse	ecui	red (Clain	ns	
Number Street			Medical		一	Part	t 2:	Cr	edi	tor	s w	/ith	ı N	on	ipri	iori	itv l	Jns	ecur	ed C	Clair	ms
			_		Ч												٠, ٠					
D-II	TV	75004 7000	 Last 4 digits of accordance 	unt numb	er				_	_	_	_										
Dallas City	TX State	75284-7229 ZIP Code	_																			
·																						
Scott & Associates, F	P.C.		On which entry in Pa	rt 1 or Pa	rt 2	did	yo	u li	st	the	e 0	rigi	ina	al (cre	edi	itor	?				
Name P.O. Box 115220			Line 4.20 of <i>(Che</i>	ck one):	П	Part	t 1:	Cr	eď	tor	s w	vith.	ı P	rio	ritv	v U	Jnse	ecui	red (Clain	ns	
Number Street				ŕ	_	Part									-							ms
			_		V	ı uı	٠ ـــ.	011	cu	toi	. vi	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		011	PII	1011	ty C	J110	Jour	ou c	Jiun	110
			- Last 4 digits of accor	unt numb	er																	
Carrollton	TX	75011	_						_	_		_										
City	State	ZIP Code																				
Wise Health System			On which entry in Pa	rt 1 or Pa	ırt 2	did	yo	u li	ist	the	e o	rigi	ina	al (cre	edi	itor	?				
Name P.O. Box 202218			Line 4.38 of (Che	ck one):	П	Part	t 1:	Cr	edi	tor	s w	/ith	ı P	rio	ritv	v U	Jnse	ecui	red (Clain	ns	
Number Street					므										-				ecur			m۹
			_		✓	· un		٠.,	Ju		J 11	1		J11	۱۱م.	.011	٠, ٠	٠١٠٠)	Jour	J. (J. (41)	
			Last 4 digits of accor	unt numb	er																	
Dallas City	TX State	75320-2218 ZIP Code	_							_		_										
Oity	State	ZIF COUL																				

Debtor 1	Sarah Dawn St	teel			Case number (if known)
Part 3:	List Others	to B	Notified Abo	ut a Debt That You Alread	dy Listed Continuation Page
	lth System - Eme	erger	ncy Medicine	On which entry in Part 1 or	r Part 2 did you list the original creditor?
PO Box 7 Number	31584 Street			Line4.27_ of (Check one)	e): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Dallas City		TX State	75373-1584 ZIP Code	— — Last 4 digits of account nur —	mber

Debtor 1	Sarah Dawn Steel	Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$1,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	÷\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$1,500.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. ⊣	\$67,672.62
	6j.	Total. Add lines 6f through 6i.	6j.	\$67,672.62

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Sarah First Name	Dawn Middle Name	Steel Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF TEXAS	
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this info	ormation to i	dentify your case	:		
Debtor 1	Sarah First Name	Dawn Middle Name	Steel Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF TEXAS	_	
Case number (if known)					Check if thi amended fi

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	`		ave any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
	☑	No Yes	
,	⊔ Wi+k		e last 8 years, have you lived in a community property state or territory? (Community property states and territories
٠.			izona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
		No.	Go to line 3.
	$\overline{\square}$	Yes	Did your spouse, former spouse, or legal equivalent live with you at the time?
			No
		$\overline{\mathbf{V}}$	Yes
			In which community state or territory did you live? Fill in the name and current address of that person.
			Tony Garza
			Name of your spouse, former spouse, or legal equivalent
			Number Street
			O'th.
			City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this infor	mation to ide	entify your case:					
Debtor 1	Sarah	Dawn	Steel				
200101	First Name	Middle Name	Last Name			Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			_ _	An amended filing
			ISTRICT OF TEX	'Δς			A supplement showing postpetition
United States Banl Case number	Krupicy Court to	tine. LASTERNO	ISTRICT OF TEX			_	chapter 13 income as of the following date:
(if known)				_			MM / DD / YYYY
Official Form 1	061						
Schedule I: Yo	our Incom	e					12/15
include information a about your spouse. your name and case	about your spo If more space i	use. If you are separ s needed, attach a se wn). Answer every c	ated and your spo eparate sheet to th	use i	s not f	iling with y	spouse is living with you, rou, do not include information any additional pages, write
Fill in your emplinformation.	loyment		Dobtor 1				Debter 2 or non filing enouge
If you have more	_		Debtor 1				Debtor 2 or non-filing spouse
job, attach a sepa with information a		Employment status	✓ Employed✓ Not employed	ed			☐ Employed☐ Not employed
additional employ	yers.	Occupation	cashier				_
Include part-time		·					
or self-employed	work.	Employer's name	Bluebonnet C	eane	rs		
Occupation may student or homer applies.	-	imployer's address	624 E. Rock Is Number Street	land			Number Street
			Boyd		тх	76023	
			City		State	Zip Code	City State Zip Code
	ŀ	low long employed ti	here? Februa	ry 9,	2017	- Pres	
				y - /		_	
Part 2: Give	Details Abou	ıt Monthly Incom	е				
			n. If you have noth	ing to	report	for any line	e, write \$0 in the space. Include your
non-filing spouse unle			er. combine the info	ormati	on for	all emplove	rs for that person on the lines below. If
you need more space			,				
					For D	ebtor 1	For Debtor 2 or non-filing spouse
		ary, and commissions nonthly, calculate what		2.		1,473.33	<u> </u>
3. Estimate and lis	t monthly over	time pay.		3. 4	•	\$0.00	
4. Calculate gross	income. Add l	ine 2 + line 3.		4.	9	\$1,473.33	

Official Form 106l Schedule I: Your Income page 1

Debtor 1 Sarah Dawn Steel Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$1,473.33 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$238.38 5a 5b. Mandatory contributions for retirement plans \$0.00 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 **Domestic support obligations** 5f. 5g. Union dues \$0.00 5g 5h. Other deductions. \$0.00 5h.+ Specify: Add lines 5a + 5b + 5c + 5d + 5e + 5f + Add the payroll deductions. 6. \$238.38 5g + 5h.Calculate total monthly take-home pay. Subtract line 6 from line 4. \$1,234.95 List all other income regularly received: 8a. Net income from rental property and from operating a 8a. \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SNAP 8f. \$140.00 8g. 8g. Pension or retirement income \$0.00 8h. Other monthly income. 8h. 🖡 Specify: \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$140.00 10. Calculate monthly income. Add line 7 + line 9. \$1,374.95 \$1.374.95 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$1,374.95 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income

Deb	tor 1	Sa	arah Da	wn Steel	Case number (if known)
13.	Doy	you ex	pect an i	increase or decrease within the year after you file this form?	
		No.		None.	
		Yes. E	Explain:		

F	ill in this inform	ation to ide	ntify your case:			Cha	ck if this	s io:	
	Debtor 1	Sarah	Dawn	Steel				s is: ended filing	
ָ 	Debior 1	First Name	Middle Name	Last Na			A supp	lement showing r 13 expenses as	
l	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame			ng date:	s or the
ι	United States Bankr	uptcy Court for	the: EASTERN D	STRICT OF	TEXAS		MM / D	D / YYYY	_
	Case number (if known)								
Of	ficial Form 10	<u>6J</u>				•			
Sc	hedule J: Yo	ur Expens	ses						12/15
cori nam	rect information. If ne and case numbe	more space is	s needed, attach and Answer every questi	ther sheet to	ling together, both an this form. On the top				
1.	Is this a joint case		asenoiu						
	No. Go to line Yes. Does D No Yes	e 2. ebtor 2 live in a	a separate househo		es for Separate Househ	nold of	Debtor	2.	
2.	Do you have depe		No ✓ Yes. Fill out this	information	Dependent's relation		o to	Dependent's	Does dependent
	Do not list Debtor 1 Debtor 2.	and	for each depend		Debtor 1 or Debtor Son	2		age 2 years	live with you?
	Do not state the de names.	ependents'							Yes No Yes
									No Yes No
									Yes No Yes
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						
Pa	art 2: Estima	te Your Ong	going Monthly E	xpenses					
to re		of a date after	the bankruptcy is fi		are using this form as a supplemental Scheo				
			ash government as t on Schedule I: You	-				Your expens	es
4.		-	xpenses for your re nd any rent for the gr				•	4.	\$350.00
	If not included in	line 4:							
	4a. Real estate ta	xes						4a	
	4b. Property, hom	eowner's, or re	nter's insurance					4b	
	4c. Home mainter	nance, repair, a	nd upkeep expenses				•	4c	
	4d Homeowner's	association or	condominium dues					4d	

Deb	otor 1 Sarah Dawn Steel	Case number (if known)			
		Your expenses			
5.	Additional mortgage payments for your residence, such as home equity loans	5.			
6.	Utilities:				
	6a. Electricity, heat, natural gas	6a.			
	6b. Water, sewer, garbage collection	6b			
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$135.00		
	6d. Other. Specify:	6d			
7.	Food and housekeeping supplies	7.	\$350.00		
8.	Childcare and children's education costs	8			
9.	Clothing, laundry, and dry cleaning	9.	\$100.00		
10.	Personal care products and services	10.			
11.	Medical and dental expenses	11.	\$100.00		
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$150.00		
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.			
14.	Charitable contributions and religious donations	14.			
15.	Insurance.				
	Do not include insurance deducted from your pay or included in lines 4 or 20.				
	15a. Life insurance	15a. 			
	15b. Health insurance	15b			
	15c. Vehicle insurance	15c	\$162.00		
	15d. Other insurance. Specify:	15d.			
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.			
17.	Installment or lease payments:				
	17a. Car payments for Vehicle 1	17a			
	17b. Car payments for Vehicle 2	17b.			
	17c. Other. Specify:	17c			
	17d. Other. Specify:	17d.			
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.			
19.	Other payments you make to support others who do not live with you.	19			

Deb	tor 1	Sarah Dawn Steel	Case number (if known)	
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	r. Specify:	^{21.} +	
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$1,347.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2. 22b	_
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,347.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$1,374.95
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$1,347.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$27.95
24.	Do yo	ou expect an increase or decrease in your expenses within the year after y	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mor	. ,	
	V	No.		
		Yes. Explain here: None.		
		None:		

Fill in this information to identify your case:							
Debtor 1	Sarah First Name	Dawn Middle Name	Steel Last Name				
Debtor 2 (Spouse, if filing)		Middle Name	Last Name				
United States Bar	nkruptcy Court fo	or the: EASTERN DIS	STRICT OF TEXAS				
Case number (if known)							

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Г	art 1: Summarize Your Assets	
		Your assets Value of what you owr
	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$8,285.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$8,285.0
	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.0
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1,500.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$67,672.6
	Your total liabilities	\$69,172.6
	art 3: Summarize Your Income and Expenses	
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,374.9
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,347.0

Deb	otor 1	Sarah Dawn Steel Ca	Case number (if known)			
Р	art 4:	Answer These Questions for Administrative and Statistica	l Records			
5 .	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?				
	ш	lo. You have nothing to report on this part of the form. Check this box and subres	nit this form to the court with you	r other schedules.		
7.	What	kind of debt do you have?				
		Your debts are primarily consumer debts. Consumer debts are those "incurre amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistic		personal,		
		Your debts are not primarily consumer debts. You have nothing to report on this form to the court with your other schedules.	his part of the form. Check this b	oox and submit		
3.		the Statement of Your Current Monthly Income: Copy your total current montal Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	thly income from	\$1,717.67		
Э.	Сору	the following special categories of claims from Part 4, line 6 of Schedule E	/F:			
			Total claim			
	From	Part 4 on Schedule E/F, copy the following:				
	9a. D	Comestic support obligations. (Copy line 6a.)	\$0.00	-		
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)	\$1,500.00	-		
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	<u>_</u>		

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

\$0.00

\$1,500.00

				<u></u>
Fill in this inf	formation to i	dentify your case	:	
Debtor 1	Sarah First Name	Dawn Middle Name	Steel Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Ba	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF TEXAS	_
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	or's Schedules	12/15
\$250,000, or impr			y fraud in connection with 18 U.S.C. §§ 152, 1341, 15	a bankruptcy case can result in fines up to 19, and 3571.
Did you pay	or agree to pay s	someone who is NOT	an attorney to help you fil	I out bankruptcy forms?
☑ No				
Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
true and cor		clare that I have read	the summary and schedu	les filed with this declaration and that they are

Signature of Debtor 2

MM / DD / YYYY

Date

Sarah Dawn Steel, Debtor 1

MM / DD / YYYY

Date 08/23/2018

Debtor 1	Sarah	Dawn		Steel		
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name		Last Name		
United States Bar	nkruptcy Court for th	e: EASTERN	DISTR	ICT OF TEX	AS	
Case number					— Check	if this is an
(if known)					_	led filing
Official Form	107					
Statement o	f Financial A	ffairs for l	Indiv	iduals Fil	ing for Bankruptcy	04/16
correct informatio	n. If more space is se number (if knov	s needed, attac vn). Answer ev	h a sep /ery qu	parate sheet to estion.	ng together, both are equally responsible to this form. On the top of any additional parties. Here You Lived Before	
☐ Married ☐ Not marrie 2. During the las ☐ No	st 3 years, have yo	u lived anywhe			you live now? ude where you live now.	
Debtor 1:	, ,		-	Debtor 1	Debtor 2:	Dates Debtor 2 lived there
					Same as Debtor 1	☐ Same as Debtor 1
139 Creas	sser Lane		From	2/2014		From
Number S	Street		То	2/2016	Number Street	То
Rhome City	TX State	76078-3005 ZIP Code			City State ZIP Code	_
Debtor 1:			Dates lived t	Debtor 1 here	Debtor 2:	Dates Debtor 2 lived there
					Same as Debtor 1	☐ Same as Debtor 1
	ate Road 4437		From_	12/2016		From
Number S	Street		To _	10/2017	Number Street	To
Rhome	TX	76078			0: 700	<u> </u>
City	State	ZIP Code			City State ZIP Code	
(Community pa Washington, a ☐ No	roperty states and to and Wisconsin.)	erritories includ	e Arizor		rivalent in a community property state or to Idaho, Louisiana, Nevada, New Mexico, Puer	-

Debtor 1		Sarah Dawn Steel Case number (if known)									
Pa	art 2:	Explain the Sources of	Your Income								
4.	Did you Fill in th	u have any income from employ ne total amount of income you rece re filing a joint case and you have	ment or from operating a beived from all jobs and all bu	ısinesses, including par	t-time activities.	lendar years?					
	□ No ✓ Yes	s. Fill in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions					
		ry 1 of the current year until I filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$13,954.51	Wages, commissions, bonuses, tips						
	uate you	a med for bankruptey.	Operating a business		Operating a business						
		calendar year:	₩ages, commissions, bonuses, tips	\$39,197.00	Wages, commissions, bonuses, tips						
(Jan	uary 1 to	December 31,	Operating a business		Operating a business						
For	the cale	ndar year before that:	✓ Wages, commissions,	\$29,719.00	Wages, commissions,						
(Jan	uary 1 to	December 31, 2016)	bonuses, tips Operating a business		bonuses, tips Operating a business						
5.	Include unempl	I receive any other income during income regardless of whether that oyment; and other public benefit publing and lottery winnings. If you 1.	nt income is taxable. Examp payments; pensions; rental ir	les of other income are ncome; interest; dividen	ds; money collected from la	awsuits; royalties;					
	List ead	ch source and the gross income from	om each source separately.	Do not include income	that you listed in line 4.						
	□ No ✓ Yes	s. Fill in the details.									
			Debtor 1		Debtor 2						
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions					
		ry 1 of the current year until u filed for bankruptcy:									
		calendar year: December 31, 2017									
		ndar year before that: December 31, 2016)	Pension	\$71,049.00							
vail	idary i ll	77777 December 31, 2016	_								

Deb	otor 1	Sarah Dawn Steel	Case number (if known)
P	art 3:	List Certain Payments You Made Befor	e You Filed for Bankruptcy
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consu	mer debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily co "incurred by an individual primarily for a personal,	nsumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as family, or household purpose."
		During the 90 days before you filed for bankruptcy	, did you pay any creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		total amount you paid that creditor. Do r	d a total of \$6,425* or more in one or more payments and the ot include payments for domestic support obligations, such as nclude payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 and every 3 years	ars after that for cases filed on or after the date of adjustment.
	✓ Yes.	Debtor 1 or Debtor 2 or both have primarily con	sumer debts.
		During the 90 days before you filed for bankruptcy	, did you pay any creditor a total of \$600 or more?
		No. Go to line 7.	
			d a total of \$600 or more and the total amount you paid that mestic support obligations, such as child support and alimony. rney for this bankruptcy case.
7.	Insiders corporat agent, in	include your relatives; any general partners; relative ions of which you are an officer, director, person in c	ke a payment on a debt you owed anyone who was an insider? s of any general partners; partnerships of which you are a general partner; ontrol, or owner of 20% or more of their voting securities; and any managing oprietor. 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes.	List all payments to an insider.	
8.		year before you filed for bankruptcy, did you mad an insider?	ke any payments or transfer any property on account of a debt that
	Include p	payments on debts guaranteed or cosigned by an ins	ider.
	✓ No ☐ Yes.	List all payments that benefited an insider.	

Debtor 1		Sarah Dawn Steel			Case numbe	Case number (if known)			
P	art 4:	Identify Legal Act	ions, Repos	sessions, and For	eclosures				
List all s		1 year before you filed fo such matters, including pe ations, and contract dispu	ersonal injury cas		•	•	•	•	
	☐ No ✓ Yes	s. Fill in the details.							
Cas	e title		Nature of the	case	Court or agency		Sta	tus of the case	
		ınding, LLC v Sarah	Debt enforc	ement	Justice Court -	Precinct 3 -	Wise	⊘ Pending	
Ste	el				County Court Name			_ 🖺 🌷	
					125 N FM 730			☐ On appeal	
Cas	e numbe	r <u>DC-18-0035-3</u>	-		Number Street			Concluded	
					Boyd	TX	76023	_	
					City	State	ZIP Code	_	
Cas	e title		Nature of the	case	Court or agency		Sta	tus of the case	
We	lls Farg	o Bank, NA v Sarah D	Debt		271st Judicial	District Cour	t	─ ☑ Pending	
Ste	el				Court Name	^ 4		V renaing	
					101 N. Trinity S Number Street	οτ.		_	
Cas	e numbe	r CV 17-02-103			#102			☐ Concluded	
			-		Decatur	TX	76234	_ _	
					City	State	ZIP Code	_	
10.	seized, Check a	1 year before you filed for or levied? all that apply and fill in the Go to line 11. s. Fill in the information be	details below.	was any of your prop	erty repossessed, forec	closed, garnisl	ned, attached	d,	
				Describe the prope	erty	Date	Value	e of the property	
Cer	ntral Loa	an Admin & R		Mobile home	•	5/20 ⁻	16		
	ditor's Nam			_			 		
_	Phillips								
Num	nber Stre	eet		Explain what happ					
				Property was re → Property was for	•				
E	lm ar	A. 1	00640	✓ Property was to ✓ Property was ga					
City	ıng	NJ State	08618 7IP Code	_	tached seized or levied				

Deb	tor 1	Sarah Dawn St	eel		Case number (if I	known)	
11.				ruptcy, did any creditor, including a o make a payment because you owe		nstitution, set off an	y
	✓ No ☐ Yes	s. Fill in the details					
12.				ptcy, was any of your property in th custodian, or another official?	e possession of an	assignee for the be	enefit of
	✓ No ☐ Yes	S					
P	art 5:	List Certain	Gifts and Co	ntributions			
13.	Within	2 years before you	u filed for bankr	uptcy, did you give any gifts with a	total value of more	than \$600 per perso	on?
	✓ No ☐ Yes	s. Fill in the details	for each gift.				
14.		2 years before you charity?	u filed for bankr	uptcy, did you give any gifts or cont	ributions with a tot	tal value of more tha	ın \$600
	✓ No ☐ Yes	s. Fill in the details	for each gift or c	contribution.			
P	art 6:	List Certain	Losses				
15.		1 year before you isaster, or gambli		ptcy or since you filed for bankrupto	cy, did you lose any	ything because of th	eft, fire,
	☑ No	s. Fill in the details					
P	art 7:	List Certain	Payments or	Transfers			
16.	anyone	you consulted at	oout seeking bar	ptcy, did you or anyone else acting nkruptcy or preparing a bankruptcy preparers, or credit counseling agencie	petition?		
	□ No ✓ Yes	s. Fill in the details					
	Legal I	Data Services Vas Paid		Description and value of any prop Credit report	erty transferred	Date payment or transfer was made	Amount of payment
4540 Honeywell Ct.				_		8/2016	\$40.00
Num	iber Str	eet		_			
Day	yton	ОН	45424				
City		State	ZIP Code				
Ema	il or websi	te address		-			
Pers	on Who M	lade the Payment, if N	ot You	-			

Debtor 1 Sarah Dawn			el	Case number (if known)					
	Debtorcc, Inc			Description and value of any property transferred Credit counseling	Date payment or transfer was made	Amount of payment			
378 Summit Ave.				_	8/2016	\$14.99			
Num	ber Street			_		_			
Jer City	sey City	NJ State	07306 ZIP Code	_					
Ema	il or website address			_					
Pers	on Who Made the Paym	ent, if Not	t You	_					
	e Wright Firm, L.L. on Who Was Paid	.P.		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
815 Num	50 N. Central Expr	essway	/	_	08/23/2018	\$625.00			
	te 775								
Dal	lae	TX	75206	_					
City	143	State	ZIP Code	_					
Ema	il or website address			_					
Pers	on Who Made the Paym	ent, if Not	t You	_					
17.	-	-		uptcy, did you or anyone else acting on your behalf pay with your creditors or to make payments to your creditors		perty to			
	Do not include any	paymen	t or transfer tha	t you listed on line 16.					
	✓ No ☐ Yes. Fill in the	details.							
18.	18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?								
	-			rs made as security (such as granting of a security interest have already listed on this statement.	or mortgage on your	property).			
	✓ No ☐ Yes. Fill in the	details.							
19.	Within 10 years be			kruptcy, did you transfer any property to a self-settled to a self	rust or similar devic	e of which			
	✓ No ☐ Yes. Fill in the								

Deb	tor 1	Sarah Dawn Steel	Case number (if known)
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	oosit Boxes, and Storage Units
20.	benefit, Include	l year before you filed for bankruptcy, were any financial accounts of closed, sold, moved, or transferred? checking, savings, money market, or other financial accounts; certificates pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	. Fill in the details.	
21.	•	now have, or did you have within 1 year before you filed for bankrup ırities, cash, or other valuables?	tcy, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	Have yo	ou stored property in a storage unit or place other than your home wi	thin 1 year before you filed for bankruptcy?
	<u> </u>	. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Els	e
23.	-	hold or control any property that someone else owns? Include any pin trust for someone.	property you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
Pá	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ł	nazardou	nental law means any federal, state, or local statute or regulation con is or toxic substance, wastes, or material into the air, land, soil, surfa statutes or regulations controlling the cleanup of these substances,	ce water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	ntal law, whether you now own, operate, or
		<i>is material</i> means anything an environmental law defines as a hazarde, hazardous material, pollutant, contaminant, or similar item.	dous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	

Debtor 1		Sarah Dawn Steel	Case number (if known)		
25.	☑ No	ou notified any governmental unit of any rel	ease of hazardous material?		
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
	✓ No ☐ Yes	. Fill in the details.			
Р	art 11:	Give Details About Your Busines	s or Connections to Any Business		
27.	Within 4		you own a business or have any of the following connections to any		
		A sole proprietor or self-employed in a trade A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of			
		An owner of at least 5% of the voting or equi			
		None of the above applies. Go to Part 12. Check all that apply above and fill in the determine the control of	ails below for each business.		
28.		2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties	you give a financial statement to anyone about your business? Include		
	□ No □ Yes	. Fill in the details below.			
Ρ	art 12:	Sign Below			
tha pro or t	t answers perty by both. 18 /s/ Saral Sarah Da	s are true and correct. I understand that ma	Affairs and any attachments, and I declare under penalty of perjury aking a false statement, concealing property, or obtaining money or e can result in fines up to \$250,000, or imprisonment for up to 20 years, Signature of Debtor 2 Date		
☑		ch additional pages to <i>Your Statement of F</i>	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?		
Did	you pay	or agree to pay someone who is not an att	orney to help you fill out bankruptcy forms?		
		me of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		

Fill in this information to identify your case:				
Debtor 1	Sarah First Name	Dawn Middle Name	Steel Last Name	
Debtor 2	i iist ivallie	Wilddie Name	Lastivallie	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS				
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Debtor 1	Sarah Dawn Steel	Case number (if known)	_
Part 3:	Sign Below		
		have indicated my intention about any property of my estate that secures a debt and	
•	al property that is subject to ar	nexpired lease.	
X <u>/s/ Sar</u>	ah Dawn Steel	X	
Sarah D	Dawn Steel, Debtor 1	Signature of Debtor 2	
Date (08/23/2018	Date	
<u></u>	MM / DD / YYYY	MM / DD / YYYY	

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS SHERMAN DIVISION

In I	re Sarah Dawn Steel	Case No.
		Chapter 7
	DISCLOSURE OF COMPENSATION O	F ATTORNEY FOR DEBTOR
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in cor is as follows:	petition in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$625.00
	Prior to the filing of this statement I have received	\$625.00
	Balance Due	\$0.00
2.	The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)	
3	The source of compensation to be paid to me is:	
Ο.	Debtor Other (specify)	
4.	☑ I have not agreed to share the above-disclosed compensation was associates of my law firm.	vith any other person unless they are members and
	I have agreed to share the above-disclosed compensation with associates of my law firm. A copy of the agreement, together with compensation, is attached.	
5.	In return for the above-disclosed fee, I have agreed to render legal s	ervice for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy;	o the debtor in determining whether to file a petition in

b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/23/2018 /s/ Alex Bouthilet

Date Alex Bouthilet

The Wright Firm, L.L.P. 8150 N. Central Expressway

Suite 775

Dallas, Texas 75206

Phone: (469) 635-6900 / Fax: (214) 780-9797

Bar No. 24080800

/s/ Sarah Dawn Steel

Sarah Dawn Steel

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS SHERMAN DIVISION

IN RE: Sarah Dawn Steel CASE NO
CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named Debtor hereby verifie	s that the attac	hed list of credit	itors is true and	correct to the b	est of his/her
know	ledge.					

Date 8/23/2018	Signature/s/ Sarah Dawn Steel Sarah Dawn Steel
Date	Signature

Barclays Bank Delaware Attn: Correspondence PO Box 8801 Wilmington, DE 19899

Baylor Regional Medical Center Grapevine P.O. Box 847229 Dallas, TX 75284

Baylor Scott & White PO Box 847229 Dallas, TX 75284-7229

BB&T

Attn: Bankruptcy Department 6010 Golding Center Dr. Winston Salem, NC 27013

BioReference Laboratories 481 Edward H. Ross Drive Elmwood Park, NJ 07407

BYL Collection Service, LLC P.O. Box 569 Malver, PA 19355-0569

Capital One P.O. Box 650007 Dallas, TX 75265-0007

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services ATTN: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595 Central Loan Admin & R 425 Phillips Blvd Ewing, NJ 08618

Citibank / Sears Citicorp Credit Services/Attn: Centraliz PO Box 790040 Saint Louis, MO 63179

Citibank/Best Buy Centralized Bankruptcy/CitiCorp Credit S PO Box 790040 St Louis, MO 63179

Cook Children's Northeast Hospital P.O. Box 99406 Fort Worth, Texas 76199-0406

Discover Financial PO Box 3025 New Albany, OH 43054

Dish Network PO Box 105169 Atlanta, GA 30348-5169

Diversified HealthCare Services, Inc. P.O. Box 847229
Dallas, TX 75284-7229

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

Freedom Road Financial ATTN: Bankruptcy Dept. 10509 Professional Circle, Suite 202 Reno, NV 89521 Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114

Internal Revenue Service PO Box 21126 Philadelphia, PA 19114

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Pathologists Bio-Med P.O. Box 610483 Dallas, TX 75261-0483

Pediatrix Medical Group PO Box 88087 Chicago, IL 60680-1087

Rajeshb Vrushab, M.D. 1615 Precinct Line Road, Ste 103 Hurst, TX 76054-3345

Schumacher Clinical Partners PO Box 830 San Antonio, TX 78293-0830

Scott & Associates, P.C. P.O. Box 115220 Carrollton, TX 75011

Sheffield Financial P.O. Box 580229 Charlotte, NC 28258-0229

South Shore Bank Attn: Bankruptcy PO Box 151 Weymouth, MA 02188

Syncb/toysrus Attn: Bankrupty PO Box 103104 Roswell, GA 30076

Synchrony Bank/Lowes PO Box 965064 Orlando, FL 32896

United States Attorney's Office 110 North College Avenue, Suite 700 Tyler, Texas 75702-0204

United States Trustee's Office 110 North College Avenue, Suite 300 Tyler, Texas 75702-7231

Us Bank 4325 17th Ave S Fargo, ND 58125

US Bank/RMS CC Attn: Bankruptcy PO Box 5229 Cincinnati, OH 45201

Wells Fargo Bank
Attn: Bankruptcy Dept
PO Box 6429
Greenville, SC 29606

Wells Fargo Bank Card MAC F82535-02F PO Box 10438 Des Moines, IA 50306 Wells Fargo Bank Ia N MAC F82535-02F PO Box 10438 Des Moines, IA 50306

Wells Fargo Bank Ia N Attn: Bankruptcy Dept PO Box 6429 Greenville, SC 29606

Wise Health System 2000 S. FM51 Decatur, TX 76234

Wise Health System
P.O. Box 202218
Dallas, TX 75320-2218

Wise Health System - Emergency Medicine PO Box 731584 Dallas, TX 75373-1584

Fill	in this inf	ormation to iden	tify your case	e:		box only as dire in Form 122A-1Su	
Deb	tor 1	Sarah First Name	Dawn Middle Name	Steel Last Name		no presumption of abu	
(Spo	tor 2 ouse, if filing)		Middle Name	Last Name	2.The calco	ulation to determine if a applies will be made u est Calculation (Officia	a presumption nder Chapter 7
Cas	ed States Ba e number nown)	nkruptcy Court for the	EASTERN DIS	STRICT OF TEXAS		ns Test does not apply ed military service but i	
					Check if t	his is an amended filing	g
Offic	cial Form	122A-1					
			our Current	t Monthly Income			12/15
are ex milita 122A-	xempted from ry service, c -1Supp) with	n a presumption of a omplete and file Stat	buse because your comment of Exemption	es, write your name and case ou do not have primarily constition from Presumption of Ab	sumer debts or be	ecause of qualifying	you
1. V		marital and filing sta					
	•	ried. Fill out Column A					
	_			Fill out both Columns A and B, I	ines 2-11.		
				ou. You and your spouse are			
	_			ot legally separated. Fill out be		B, lines 2-11.	
	dec	lare under penalty of p	perjury that you ar	d. Fill out Column A, lines 2-11 and your spouse are legally separated that do not include evading to	arated under nonba	ankruptcy law that appl	ies or that you
k <i>F</i> ii	cankruptcy c August 31. If n the result.	ase. 11 U.S.C. § 101 the amount of your mode on the contract of the contract o	(10A). For examentally income values amount more	red from all sources, derived aple, if you are filing on Septem ried during the 6 months, add the than once. For example, if be have nothing to report for any	ber 15, the 6-mont ne income for all 6 oth spouses own t	h period would be Mar months and divide the he same rental propert	ch 1 through total by 6. Fill
					Column A	Column B	
					Debtor 1	Debtor 2 or non-filing spouse	
	•	rages, salary, tips, bo	onuses, overtime	e, and commissions	\$1,717.67		•
	Alimony and f Column B is		nts. Do not inclu	de payments from a spouse	\$0.00		
e r y	expenses of y egular contrib our depende	outions from an unmar nts, parents, and roon	ents, including claried partner, men nmates. Include i	paid for household nild support. Include nbers of your household, regular contributions from ude payments you listed	\$0.00		

on line 3.

Deb	otor 1 Sarah Dawn Steel			C	ase number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net income from operating a busine	ess, profession, or	r farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		-			
	Ordinary and necessary operating — expenses	\$0.00		- Сору			
	Net monthly income from a business, profession, or farm	\$0.00		here →	\$0.00		
6.	Net income from rental and other re						
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		-			
	Ordinary and necessary operating — expenses			- Сору			
	Net monthly income from rental or other real property	\$0.00		_ here →	\$0.00		
7.	Interest, dividends, and royalties				\$0.00		
8.	Unemployment compensation				\$0.00		
	Do not enter the amount if you content benefit under the Social Security Act.						
	For you		\$0	.00			
	For your spouse						
9.	Pension or retirement income. Do not was a benefit under the Social Securi		ount received tha	t	\$0.00		
10.	Income from all other sources not I amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorism. separate page and put the total below	received under the war crime, a crime If necessary, list o	Social Security A against humanit	Act y,			
	Total amounts from separate pages, i	f any.		+		+	
11.	Calculate your total current monthly Add lines 2 through 10 for each column Then add the total for Column A to the	nn.	3.		\$1,717.67	+	= \$1,717.67 Total current monthly income

Debtor 1 Part 2:		S	arah Dawn Steel		Case number (if known)		
			Determine Whether the Means	Test Applies to You			
12.	Calc	ulate	your current monthly income for the y	/ear. Follow these steps:			
	12a.	Cop	by your total current monthly income from	n line 11	Copy line 11 here 😝 12a. \$1,717.67		
		Mul	tiply by 12 (the number of months in a ye	ear).	X 12		
	12b.	The	result is your annual income for this par	t of the form.	12b. \$20,612.04		
13.	Calc	ulate	the median family income that applies	s to you. Follow these steps:			
	Fill in	the s	state in which you live.	Texas			
	Fill in	the r	number of people in your household.	2			
	Fill in	the r	median family income for your state and	size of household	13. \$63,148.00		
			ist of applicable median income amounts s for this form. This list may also be ava		·		
14.	How	do th	ne lines compare?				
	14a.	$\overline{\mathbf{V}}$	Line 12b is less than or equal to line 13 Go to Part 3.	3. On the top of page 1, check	pox 1, There is no presumption of abuse.		
	14b.		Line 12b is more than line 13. On the 1 Go to Part 3 and fill out Form 122A-2.	top of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.		
P	art 3:		Sign Below				
	By	signir	ng here, I declare under penalty of perjur	y that the information on this st	atement and in any attachments is true and correct.		
	•	Ü		•	,		
			arah Dawn Steel n Dawn Steel, Debtor 1	X	ature of Debtor 2		
				2.9.			
		Date _.	8/23/2018 MM / DD / YYYY	Date	MM / DD / YYYY		
	If v	nu ch	ecked line 14a. do NOT fill out or file Fo	rm 122A-2	WWW.7 DD.7 TTTT		

If you checked line 14b, fill out Form 122A-2 and file it with this form.